07-03-06.

Application Number

PTO/SB/21 (09-04)

(OVE)	Application Number	10/682,252	
ÍRANSMITTAL	Filing Date	October 9, 2003	
JUN 3 0 2006 () FORM	First Named Inventor	Sanjay P. Ghatare	
jij .	Art Unit	2165	
(to be used for all correspondence after initial filing)	Examiner Name	Farhan M. Syed	
Total Number of Pages in This Submission 3	9 Attorney Docket Number	21756-014400	
	ENGLOSUSES		
	ENCLOSURES (Check all that	After Allowance Communication to TC	
Fee Transmittal Form (1 page in duplicate)	Drawing(s)	After Allowance Communication to 1C	
Fee Attached	Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences	
Amendment/Reply (16 pages)	Petition	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)	
After Final	Petition to Convert to a Provisional Application	Proprietary Information	
Affidavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Addre	vocation Status Letter	
Extension of Time Request	Terminal Disclaimer	Other Enclosure(s) (please identify below):	
Express Abandonment Request	Request for Refund 1. Return Postcard 2. Request for corrected Filing Receipt (2)		
Information Disclosure Statement	CD, Number of CD(s)	pages)	
(13 pages) 51 document enclosures	Landscape Table on CD	3. ADS (3 pages) 4. Copy of Filing Receipt (2 pages)	
I I Ocianica copy of thomy		uthorized to charge any additional fees to Deposit	
Document(s)	Account 20-1430.		
Reply to Missing Parts/ Incomplete Application			
Reply to Missing Parts under 37 CFR 1.52 or 1.53			
SIGNATU	RE OF APPLICANT, ATTORNI	EV OR AGENT	
Firm Name		II, OK AGENT	
Townsend and Townsen	d and Crew LLP		
Signature	O. Cly		
Printed name William J. Daley	•		
Date June 30, 2006	Reg. No.	52,471	
CER	TIFICATE OF TRANSMISSION	/MAILING	
Express Mail Label: EV 829160969 US			
	CFR 1.10 on this date June 30,	ed States Postal Service with "Express Mail 2006 and is addressed to: Commissioner for low.	
Signature Sun Qu	B. Atalon	b	
Typed or printed name Sara B. McPeak	10 /100/20	Date June 30, 3006	

PT	O/SB/	17 (01-06

JN & © 7008						PTO/SB/17 (01-	
			Complete if Known				
	idated Appropriations Act, 2005 (I	1 A	Application Num	ber 10/682	2,252		
FEE TR	ANSMITT	4L [iling Date	Octobe	er 9, 2003		
For FY 2006		F			P. Ghatare		
					Farhan M. Syed		
Applicant claims small	entity status. See 37 CFR 1		Art Unit 2165				
TOTAL AMOUNT OF PAYMENT (\$) 180		7	Attorney Docket No. 21756-014400		-014400		
METHOD OF PAYMEN	IT (check all that apply)						
Check Credit	Card Money Order	None	Other (pl	ease identify):			
Deposit Account	Deposit Account Number: 20	-1430	Deposit Acco	unt Name: Towns	end and Townse	end and Crew LLP	
For the above-ide	entified deposit account, the	Director is her	eby authorized	to: (check all tha	at apply)		
Charge fee((s) indicated below		Char	ge fee(s) indicat	ed below, excep	t for the filing fee	
Wunder 37 CF	additional fee(s) or underpay R 1.16 and 1.17 his form may become public. C			t any overpaymo		credit card	
information and authorization	on on PTO-2038.						
· · · · · · · · · · · · · · · · · · ·	All the fees below are du		g or may be	subject to a s	urcnarge.)		
1. BASIC FILING, SEA	ARCH, AND EXAMINATION FILING FEES		CH FEES	EXAMINA'	TION FEES		
Application Type	Small Entity Fee (\$) Fee (\$)	9	mall Entity Fee (\$)		III Entity	Fees Paid (\$)	
Utility	300 150	500	250		100		
Design	200 100	100	50	130	65		
Plant	200 100	300	150	160	80		
Reissue	300 150	500	250	600	300		
Provisional	200 100	0	0	0	0		
2. EXCESS CLAIM FE	ES				<u>Sr</u>	nall Entity	
Fee Description	<i></i>				Fee (\$)	Fee (\$)	
	(including Reissues) laim over 3 (including Re	icenee)			50 200	25 100	
Multiple dependent		issuesj			360	180	
Total Claims	Extra Claims Fee		Paid (\$)		Multiple Depe Fee (\$)	ndent Claims Fee Paid (\$)	
	claims paid for, if greater than 20		Paid (\$)				
) = X						
	endent claims paid for, if greater	than 3					
3. APPLICATION SIZE If the specification an	d drawings exceed 100 sl CFR 1.52(e)), the applica	neets of pape	er (excluding	electronically	filed sequence	or computer	
	thereof. See 35 U.S.C. 4				oning) for our		
Total Sheets	<u>Extra Sheets</u> / 50 =				ereof Fee (\$)	Fee Paid (\$)	
-			, p	,	.	Fees Paid (\$)	
4. OTHER FEE(S) Non-English Spec	cification, \$130 fee (no	small entity	discount)			i ees Faiu (\$)	
		·		naura Ctt		180	
Other (e.g., late fi	iling surcharge): Submis	sion of Infoi	mation Discle	osure Stmt		100	
SUBMITTED BY							
Signature	1////	19	Registration No (Attorney/Agent)	52,471	Telephone	303-571-4000	
Name (Print/Type) Willi	/////////////////////////////////////						